# FORM D

# **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0076 **Expires** April 30, 2008 Estimated average burden 16.00

hours per response:

SEC Mail Processing Section

JAN 16 2008

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
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Washington DC

107			PROCESSED
Name of Offering ( check if this is an amendment and	name has changed, and indicate change.)		
Private Placement of Limited Partne	ership Interests		JAN 2 8 2002
Filing Under (Check box(es) that apply):   Rule 5	04 🔲 Rule 505 🗹 Rule 506 🔲 🤅	Section 4(6)	ULOE
Type of Filing: ☑ New Filing ☐ Amendment			<u> </u>
	A. BASIC IDENTIFICATION DATA		-> FINANCIAL
1. Enter the information requested about the issuer			
Name of Issuer ( check if this is an amendment and	name has changed, and indicate change.)		
DB Private Equity Asia Select Fund	III (International), L.P.		
Address of Executive Offices	(Number and Street, City, State Zip Code)	Telephone Nun	FIRST AND AND AND AND DESIGNATION AND AND AND
c/o Private Equity Asia Select III GP, Ltd; P.O. Box 2	510, Grand Cayman KY1-1104, Cayman Islands		
Address of Principal Business Operations	(Number and Street, City, State and Zip Code)	Telephone Nur	
(if different from Executive Offices)			08021856
Brief Description of Business			<del></del>
Investment Fund			
Type of Business Organization	•		
	☑ limited partnership, already formed	other (please spe	cify):
□ business trust	☐ limited partnership, to be formed		
	Month Year	_	_
Actual or Estimated Date of Incorporation or Organizati	on: 0 8 0 7	☑ Actual	☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation for	or State:	
	CN for Canada; FN for other foreign jurisdiction	)	FN

#### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and When To File: Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

• Each promoter of the	issuer, if the issuer	has be	en organized within th	e past	t five years;				
Each beneficial owner	r having the power 1	o vote	e or dispose, or direct t	he voi	te or disposition of, 10	)% от 1	more of a cla	iss of e	quity securities of the issuer;
Each executive office:	r and director of cor	porate	e issuers and of corpora	ate ge	neral and managing p	artners	of partners!	nip issu	iers; and
Each general and man									
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer		Director	Ø	General and/or Managing Partner
Full Name (Last name first, if inc	dividual)								
Private Equity Asia Se		i.							
Business or Residence Address	(Number and Stre	et, Cit	y, State, Zip Code)						
P.O. Box 2510, Grand	Cayman KY1-	1104	i, Cayma <u>n Islan</u>	ds					
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	<u></u>	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if inc	dividual)								
Bizzozero, Marco									
Business or Residence Address	•		ty, State, Zip Code)						
Bahnhofquai 9/11, 14th	Floor, Zurich	, 80	23, Switzerland						
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	M	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in	dividual)								
Sellers, Colleen									, ·
Business or Residence Address	(Number and Stre	et, Ci	ty, State, Zip Code)						
280 Park Avenue, New	York, New Y	<u>ork</u>	10017						
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in	dividual)								
Kiley, Charles							-		
Business or Residence Address	(Number and Stre	et, Ci	ty, State, Zip Code)						
280 Park Avenue, New	York, New Y	ork	10017						
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	図	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in	dividual)								
Doyle, Ann							<del>.</del>		
Business or Residence Address			ty, State, Zip Code)						
280 Park Avenue, New	York, New Y	ork	10017						
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer	$\square$	Director		General and/or Managing Partner
Full Name (Last name first, if in	dividual)								····
Khan, Aquil									
Business or Residence Address	(Number and Str	eet, C	ity, State, Zip Code)						
Bahnhofquai 9/11, 14 <sup>tt</sup>									
Check Box(es) that Apply:	☐ Promoter	a	Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in	dividual)		· · · · · ·						
Pfister, Peter F.	· 								
Business or Residence Address	(Number and Str	eet, C	ity, State, Zip Code)						
Bahnhofquai 9/11, 14 <sup>t</sup>	<sup>h</sup> Floor, Zuricl	h, 80	23, Switzerland	<u> </u>					
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in	idividual)								
Plimpton, David									
Business or Residence Address	•		ity, State, Zip Code)						
1 South Street, 23 <sup>rd</sup> FI	oor, Baltimor	e, M	aryland 21202						
	(Use bla	ınk sh	eet, or copy and use ac	dition	nal copies of this shee	t, as ne	ecessary.)		

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

			A. BASIC IDEN	TIFI	CATION DATA				
2. Enter the information reque	ested for the followi	ng:							
Each promoter of the	issuer, if the issuer	has b	een organized within the	he pas	st five years;				
Each beneficial owner	r having the power	lo voi	e or dispose, or direct	the vo	te or disposition of, 10	)% or	more of a cl	ass of e	quity securities of the issuer;
			te issuers and of corpor		•				
		_	-	are gr	neral and managing p	ai uiçi.	or paraiers	mp issu	crs, and
Each general and mar  Check Box(es) that Apply:	Promoter				Evenutive Offices		Director		Cananal and/or
Check Box(es) that Apply.	Li Promoter		Beneficial Owner	₩	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if inc	lividual)								
Sturdevant, Wes									
Business or Residence Address	(Number and Stre	et, Ci	ty, State, Zip Code)						
280 Park Avenue, New	York, New Yo	ork	10017						
Check Box(es) that Apply:	☐ Promoter	ū	Beneficial Owner	Ⅵ	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if inc	lividual)								
Wang, Pying-Huan C.	<del></del>								
Business or Residence Address			ty, State, Zip Code)						
Bahnhofquai 9/11, 14 <sup>th</sup>	Floor, Zurich	, 80	23, Switzerland						
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if inc	lividual)								
Wein, Nikolaus									
Business or Residence Address			ty, State, Zip Code)						
Bahnhofquai 9/11, 14 <sup>th</sup>	Floor, Zurich	, 80	23, Switzerland						
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	Ø	Executive Officer		Director	0	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)								
Lee, Susan									
Business or Residence Address	·		ty, State, Zip Code)						
280 Park Avenue, New	York, New Yo	ork							
Check Box(es) that Apply:	□ Promoter		Beneficial Owner	<u> </u>	Executive Officer	□	Director		General and/or Managing Partner
Full Name (Last name first, if ind	lividual)								
O'Grady, Joanie			<del></del>						
Business or Residence Address			ty, State, Zip Code)						
280 Park Avenue, New									
Check Box(es) that Apply:	□ Promoter		Beneficial Owner	<u> </u>	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)								
Rusconi, Federico									
Business or Residence Address			ry, State, Zip Code)						
23 Austin Friars, Londo									
Check Box(es) that Apply:	□ Promoter		Beneficial Owner	<u> </u>	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)								
Shkarupina, Elena	*							·····	· · · · · · · · · · · · · · · · · · ·
Business or Residence Address			y, State, Zip Code)						
Places des Bergues 3,			Switzerland et, or copy and use add	litio-	l coninc of this share	ne ===	ecces. \		<u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>
	(Ose blan	w PilC	er or copy and use add	HUOH	a copies of mis sneet,	as nec	cosary.)		

				<u> </u>	B. IN	FORMA I	TON ABO	OUT OFF	ERING				
												Yes	No
I. Ha	as the is	suer sold	, or does th						offering?		•••••		Ø
				,	Answer also	in Append	lix, Column	2, if filing	under ULOI	Ξ.			
<ul> <li>What is the minimum investment that will be accepted from any individual?</li> <li>* At discretion of the Issuer lesser amounts may be accepted for investment.</li> </ul>												\$ 250	0,000*
3. Do	es the	offering p	ermit joint	ownership	of a single	unit?						Yes ☑	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)													
Full N	ame (L	ast name	first, if ind	ividual)									
Ducine	acc or D	ecidence	Address ()	Number and	Street Cit	v Stata 7is	- Code)						
						y, State, Zij	Code						
			roker or De	New Yor	K 10005	<del></del>	<del></del>						
			ecurities										
				s Solicited lividual Stat								🗹 A	ll States
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[IL]	_	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	-	[NE]	[NV]	[NH]	ָנאן	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ame (L	ast name	first, if ind	iviđual)									
Busine	ss or R	esidence	Address (N	Number and	Street, City	y, State, Zip	Code)						
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			oker or De	rk, New \	rork 100	17		·	<del></del>				
				npany An									
				s Solicited ividual Stat								DA	Il States
✓ [AI		' [AK]	[AZ]	✓ [AR]	✓ [CA]	✓ [CO]	✓ [CT]	✓ [DE]	✓ [DC]	[FL]	✓ [GA]	[HI]	✓ [ID]
[IL]	-	/ [IN]	✓ [IA]	✓ [KS]	✓ [KY]	[LA]	✓ [ME]	✓ [MD]	✓ [MA]	✓ [MI]	✓ [MN]	✓ [MS]	✓ [MO]
✓ [M	-	[NE]	✓ [NV]	✓ [NH]	עאן ∨ ַ	[NM]	✓ [NY]	✓ [NC]	[ND]	√ [OH]	✓ [OK]	✓ [OR]	✓ [PA]
[RI]	] ✓	[SC]	✓ [SD]	✓ [TN]	[TX]	✓ [UT]	✓ [VT]	✓ [VA]	✓ [WA]	✓ [WV]	✓ [WI]	✓ [WY]	✓ [PR]
Full Na	ame (La	ast name	first, if ind	ividual)									
Busine	ss or R	esidence	Address (N	Jumber and	Street, City	, State, Zip	Code)	•					
					•		•						
Name o	of Asso	ciated Br	oker or De	aler									
				s Solicited o			rchasers						All States
[AL]	]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	IUTI	[VT]	[VA]	[WA]	(WV)	ſWI	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

:	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
]	Debt	<b>s</b> _	0	\$	0
]	Equity	\$	0	\$	0
	☐ Common ☐ Preferred			,	
	Convertible Securities (including warrants)	s	0	\$	0
	Partnership Interests	s	300,000,000	s	3,250,000
	Other (Specify )	\$	0	\$	0
	Total	s –	300,000,000	\$	3,250,000
	Answer also in Appendix, Column 3, if filing under ULOE.	*-		•	
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number		Aggregate Dollar Amount
			Investors		of Purchases
	Accredited Investors	_	4	\$	3,250,000
]	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)	_	N/A	S	N/A
!	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of Security		Dollar Amount
	Type of Offering		ALC A		Sold
	Rule 505	_	N/A	\$	N/A
]	Regulation A		N/A	\$	N/A
]	Rule 504		N/A	\$	N/A
	Total	_	N/A	\$	N/A
secu info	Furnish a statement of all expenses in connection with the issuance and distribution of the urities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The ormation may be given as subject to future contingencies. If the amount of an expenditure is not own, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees.			\$	<u>.</u>
ı	Printing and Engraving Costs		₪	\$	170,838
ı	Legal Fees		₩	\$	241,067
	Accounting Fees			\$	
1	Engineering Fees		٥	\$	
:	Sales Commissions (specify finders' fees separately)		a	\$	
	Other Expenses (identify) Miscellaneous			\$	66,518
	Total		☑	S	478,423*

<sup>\*</sup> This amount represents the total expenses to be allocated on a pro-rata basis between DB Private Equity Asia Select Fund III (U.S), L.P. and DB Private Equity Asia Select Fund III (International), L.P.

	C. OFFERING PRICE, I	NUMBER OF INVESTORS, E	EXPENS	SES.	AND USE OF PI	ROCE	EDS	S
	b. Enter the difference between the aggregate of and total expenses furnished in response to Pagross proceeds to the issuer."	rt C - Question 4.a. This difference is the	he "adjuste	ed .		s	j	299,521,577
5.	Indicate below the amount of the adjusted gross for each of the purposes shown. If the amount and check the box to the left of the estimate, adjusted gross proceeds to the issuer set forth in	for any purpose is not known, furnish The total of the payments listed mu	an estima st equal tl	te		~_		
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees		🗆	\$		Ø	s.	243,750*
	Purchase of real estate			\$_			\$ _	
	Purchase, rental or leasing and installation of ma	chinery and equipment	📮	\$_			\$ .	
	Construction or leasing of plant buildings and fa	cilities	🗖	\$_			\$ .	
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	assets or securities of another issuer		e		0	¢	
	Repayment of indebtedness			³-			, ,	· · · · · · · · · · · · · · · · · · ·
	Working capital			³ -		•		
	Other (specify): Investments in private			<b>.</b>		. "	ૐ.	
		o oquity fullido	_					
		<del>-</del>		\$_		Ø	\$	299,277,827
	Column Totals		🗅	\$_		✓	\$ _	299,521,577
	Total Payments Listed (column totals added)		***************************************		M \$	299,5	21,5	77
		D. FEDERAL SIGNAT	rure					
C	he issuer has duly caused this notice to be signed constitutes an undertaking by the issuer to furnish t y the issuer to any non-accredited investor pursuan	o the U.S. Securities and Exchange Co.						
DE	er (Print or Type)  3 Private Equity Asia Select Fund (International), L.P.	Signature	<u> </u>		Date 8 January 200	8		
	ne of Signer (Print or Type)	Title of Signer (Print or Type)			<u> </u>			
An	drew Hersant	Authorized Signatory of P Partnerof DB Private Equit		•	7			·

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

\*This number represents the management fee, which is an amount equal to 1.5% of total capital commitments per year-for the first five years of the Fund. Thereafter, the management fee will be equal to 1.5% of unreturned capital, if any.